



FEB-15-2007 THU 03:00 PM CANTOR COLBURN LLP

FAX NO. 8602860115

P. 02

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Patricia DiGregorio (Depositor's name)
Patricia DiGregorio (Signature)
February 15, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/668,541

09/23/2003

Caroline Le-Picard

14XT00219 (135960)

2097

TITLE OF INVENTION: X-RAYS EMITTER AND X-RAY APPARATUS AND METHOD OF MANUFACTURING AN X-RAY EMITTER

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	02/26/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
KIKNADZE, IRAKLI	2882	378-123000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1. CANTOR COLBURN LLP

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

GE Medical Systems Global Technology
Company, LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Waukesha, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

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Authorized Signature

Date February 15, 2007

Typed or printed name Philmore H. Colburn II

Registration No. 35,101

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